

Training Health Administrators

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SHORTLY after World War II, leaders in the National Tuberculosis Association reviewed current and future personnel needs and came to the conclusion that within a few years many key executives in State and local affiliates would soon be lost because of death or retirement. This inventory led to the conclusion that, in order to avoid a crisis resulting from a shortage of professionally trained personnel for executive positions, it would be necessary to take some positive steps. The steps taken culminated in the establishment of a graduate training program in health administration at Wayne State University, Detroit, Mich.

There was much discussion in public health circles during this period concerning the proper role and training of nonmedical administrators. The need for such personnel was well recognized, but the role to be played, especially in official health agencies, was vague. Formal training, with the exception of hospital administrator programs, had not as yet been institutionalized. This state of affairs was revealed in the "Proposed Report on Educational and Experience Qualifications of Administrative Personnel (Non-Medical) in Public Health Agencies" that appeared in the *American Journal of Public Health* in April 1951. The report asserted that: "The basic preparation of a non-

medical administrator in public health agencies should give him an awareness of the social setting and biological basis of health work and training in the role and organization of administration." This generalization is a succinct statement of the general policy followed some 3 years earlier in organizing the Wayne program.

Since the position of executive secretary in a voluntary health agency had traditionally been held by a lay person and since no particular professional group had ever dominated these positions, it was possible to design a training program for potential executive secretaries with a remarkable degree of freedom. The committee which met in Detroit in the fall of 1948 to consider such a design included among its members two medical health officers, a professor of health education from a school of public health, and personnel from NTA and the university. The committee's decision to develop a curriculum combining training in the art and science of administration with substantive training in health was later echoed in a report of a committee of the American Public Health Association. Within this general framework, the committee further decided that the responsibilities of the positions to be filled required a degree of maturity and sophistication that could only be achieved through graduate training; that the core of the curriculum should be training in administration, with the health content provided, for the most part, through the use of outstanding public health practitioners and teachers as guest lecturers and through field training; that the principal criteria for admission should be a sincere interest in serving the public and a demonstrated capacity to do quality graduate work; and that fellowships should be offered in order to attract the best possible candidates.

Dr. Mowitz is professor of political science, Wayne State University, Detroit, Mich. The National Tuberculosis Association supplied basic financial support for the 9 years' experience in training public health administrators described, through annual grants to the university and the establishment of a number of fellowships each year. Fellowships have been provided also by the National Society for Crippled Children and Adults and the American Cancer Society.

Using the guidelines developed by the committee, the details were worked out, and with the support of NTA, the program got underway with two students in January 1949. In September 1949, it was established as a full-time 12-month program, including two semesters of course work and a summer of field training, and eight additional students were enrolled. By September 1958, 58 fellowship students had completed the training. Since this has been a rather unique experiment in training for the health profession, a brief review of the past 9 years' experience should be of interest.

One characteristic of the Wayne program that seems to result in an occasional raised eyebrow in public health circles is its location as part of a public administration curriculum. This may be due in part to a misconception of the public administration discipline. Or in part it may be due to a feeling that all training for public health positions should be confined to schools of public health, a position avoided in the APHA report referred to above but still in existence and detectable to even the casual observer. To argue the point is not the purpose of this article. But it is appropriate to point out that the public administration discipline is reaching a point of development wherein training in its art and science is rapidly becoming indispensable to anyone holding a position of responsibility in any organization claiming to serve the public interest. Errors that at an earlier time could be excused as the necessary cost of a trial-and-error approach to administration become inexcusable with the availability of knowledge and skills to avoid such errors. It would seem to make sense, then, to use the content of public administration as a base upon which to build the health administrator's training. Certainly in 1948 it seemed to be worth a try, and it was appropriate for a voluntary agency with a tradition for experimentation to spur the effort.

Program Format

A curriculum problem during the past 9 years has been to keep abreast of the dynamic changes occurring in both the health and public administration fields. Social science research is producing findings that provide the basic input of

facts with which the student of administration must deal. These include the psychologists' findings in relation to motivation, perception, and learning on the one hand and, on the other hand, experimentation in the use of mathematical models to solve program problems through the use of operations research techniques. A current course in the curriculum deals with the relationship of a bureaucracy to the policymaking process in a pluralistic power system. This course was not part of the curriculum 9 years ago. In addition there are courses in group dynamics and discussion and conference techniques.

But seminars have been the principal vehicle for keeping public administration subject matter abreast with current knowledge. It seems necessary to emphasize this point since it appears many still have the notion that the discipline of administration is confined to the study of formal organizational structure and administrative procedures. (The standard texts in "public health administration" tend to give this impression.) The point being made here is that the dimensions of the discipline increase as our knowledge about behavior in complex organizations and systems of organizations increases.

It is not necessary to elaborate on the changes in the health field during the past few years. For the most part, guest lecturers covered this part of the curriculum. During the past 9 years, well over 100 different speakers have participated. The large number is due in part to the shifting emphasis in public health problems in recent years and the need to bring in different specialists to deal with these subjects. At the same time it has been the policy to supply a wide variety of professional points of view in order to avoid a stereotyped approach to a dynamic area of study.

A core of eight guest lecturers participate each year, and it is around this core that the other lectures are scheduled. Although the temptation to engage in name dropping is almost irresistible at this point, suffice it to say that the lecturers are recruited from official health agencies (Federal, State, and local), schools of public health, colleges of medicine, voluntary health associations, and research foundations, to name only the major sources. Those who have participated in the guest lec-

ture system, either as teacher or student, know the difficulties involved in its use, but its justification lies in its ability to bring to a class a variety of skills and talent that cannot be duplicated on a single campus. The core eight who appear annually are strategically spaced throughout the year, and their familiarity with the program assists the course director in integrating the various lectures. Experience here would indicate that it takes at least 3 years to "shakedown" a guest lecture program into an effective teaching device and, of course, constant attention thereafter. Supplementing the guest lectures is concurrent and summer field training with official and voluntary agencies.

Student Characteristics

The 58 fellowship students received their undergraduate degrees from 38 different colleges and universities distributed geographically in all sections of the United States. Most had undergraduate majors in one of the social sciences, with political science, sociology, and public administration the predominant fields. Three had majored in one of the physical sciences and one student had been in business administration. Although no particular undergraduate major has been required as a condition of admission, the organization of the program in conjunction with the public administration curriculum seems to have attracted the social science major. Experience has shown that there is no one best major, and there are decided advantages in having a group of students with a variety of undergraduate backgrounds.

Six students had had prior experience in voluntary health associations, and two left positions with official agencies to accept fellowships. For the remaining 50, the training was their first exposure to public health. Most of this group had been motivated to apply for the fellowship as a result of the advice of a faculty adviser, but a few had been self-motivated after reading printed material. The college professor has been the most effective recruiter for this program.

In comparing the performance of students who have had prior experience in public health work with those who have not, it would be diffi-

cult to make a good case for a program that would exclude either one of these categories. Certainly the student with experience contributes a good deal to his inexperienced colleagues, but the student fresh out of college has usually developed the good study habits and concern for scholarly detail in fulfilling assignments that help keep the training at that level of sophistication commensurate with graduate study. In addition, there is the virtue of introducing new blood into the field through recruiting the college graduate directly into professional training.

All but five of the students have been men, all but six of whom had some prior military service. The only significance of this latter fact is that it indicates that most of the men were in their middle twenties and, having fulfilled their military obligations, were able to accept a full-time position at the completion of their training.

Placements

One of the issues discussed by the planning committee in 1948 involved the possibility that students with sound training as administrative generalists would desert the health field. If transferable skills were to be taught, why couldn't they be transferred to any other field? It was felt that this was a risk worth taking, but the ghost of this issue continues to haunt this and other health training programs. The insistence by many that public health experience should precede postgraduate training is another manifestation of this compulsion to prevent personnel from escaping the field. There are obvious reasons for this point of view. Subsidized training, whether in the form of fellowships or other means, is expensive, and, too, there are the strong feelings of those who are sincerely committed to a particular field of endeavor and who have a tendency to question the motives of those who do not share their zeal.

On sober reflection, however, most would agree that in a free society it is the challenging nature of the position and the opportunity it provides to maximize values considered important to that society that will determine the outcome in the competition for personnel. It would be a disservice to society to erect barriers that would hold a person in a position demand-

ing only a portion of his talents and energy, to say nothing of the effect it would have on the individual so held. With these considerations in mind, it is of interest to review what has happened to the students after completing training.

Thirty-six graduates, a little more than 60 percent, are working in the health field. The majority of this group, 31, are employed by voluntary health agencies. Affiliates of the National Tuberculosis Association lead the list of employers, followed by the American Cancer Society. Also included among the employing agencies are affiliates of the American Heart Association, the National Society for Crippled Children and Adults, the Mental Health Association, and local health councils. The following indicates the types of positions held.

<i>Position</i>	<i>Number</i>
Executive secretary of State organization----	6
Executive secretary of local organization----	7
Member of national staff-----	3
Member of State staff-----	8
Member of local staff-----	7

The State and local staff positions include administrative assistant to the executive secretary, program director, field consultant, public relations director, and the like.

Of the remaining five who were counted as working in the health field, four are hospital administrators and the fifth is completing work leading to the degree of doctor of medicine. Two of the hospital administrators took additional academic training in hospital administration after leaving Wayne, but the other two did not. An applicant primarily interested in hospital administration is urged to apply to one of the schools with such a formal program, since Wayne is not designed for that purpose. But as can be seen, this does not prevent graduates from becoming hospital administrators, if they are so determined.

Of the 22 who are not working in the health field, 13 had been employed for a year or more in a health agency before leaving for other employment. This leaves 9 out of 58 who did not spend at least a year in the health field. Of the nine, three entered the armed services directly after their academic training, two accepted positions in the Federal civil service, three were employed by private business or in-

dustry, and one became a school teacher. A breakdown of the current positions held by this group of 22 shows 7 in private business or industry, 5 in public service (this includes 1 Marine career officer and 1 State legislator), 4 teachers (including 1 college instructor), 2 attending graduate school, 2 housewives, and 2 unknown.

In reviewing these data, it is interesting to note that none of the graduates is employed by official health agencies. During the initial discussions and on numerous subsequent occasions, health officers have commented that this program provides a type of training for which there is great demand among official health agencies. Former students have reported offers of positions in official agencies, but those who have remained in public health have remained with the voluntary agencies. The responsibility and prestige of those positions held with the voluntary agencies may be the reason. The opportunities for advancement and career development have been excellent for those willing and able to take advantage of them.

In addition to the fellowship students, six employees of official health agencies have been enrolled part time. Four completed the course requirements, and two are now enrolled. Two of these students are employed by a county health department and four by the Michigan Department of Health. All but one now hold positions of administrative responsibility, and their academic backgrounds vary from veterinary medicine to engineering. Although this is too small a group on which to base large conclusions, all have stated that the training was well worth the extraordinary effort required to keep up with both their jobs and academic responsibilities.

Conclusion

An experimental graduate program for training health administrators will soon begin its 10th year of operation at Wayne State University. Sixty percent of its 58 graduates are now engaged in some variety of health work, most with voluntary health agencies. Curiously enough, 6 of the first 10 students now hold executive positions with health agencies, the same percentage as for the entire group. These data

indicate that the training has equipped the students for the type of responsibilities envisaged in the design of the program. This is not to imply that what has been described here is presented as a model for all comparable training.

On the contrary, the continuing critical shortage of qualified administrative personnel should encourage experimentation and improvement of current working models and at the same time stimulate the development of new models.

Legal note . . . Sanitation: Sewer Rental Charges

Municipality's sewer rental charge based solely on amount of water intake held arbitrary where it refused to accept industrial waste from plant which discharged 95 percent of its intake into its own waste treatment plant or directly into a creek. Court required rental to be based on discharge into sewer system. *Borough of North East v. A Piece of Land, etc.* (159 A. 2d 528, Pa., April 1960).

In accordance with an ordinance of the Borough of North East, Pa., providing that the total annual sewer rental was to be equal to the total operating costs and be "equitably apportioned" among sewer users in proportion to the amount of water purchased from the Borough, the sewer rental charge was fixed at 20 percent of the water charge.

The Welch Grape Juice Company, Inc. (owner of the land against which the Borough was seeking to enforce a lien for sewer rental charges) purchases a considerable amount of water, 95 percent of which is used in its plant and ultimately discharged into its own treatment basin or directly into a creek. The company, having been refused permission by the Borough to discharge industrial waste into the sewer system, discharges into the Borough sewer system only the waste from its restrooms, cafeteria, and shower and drinking facilities, which constitutes about 5 percent of the water purchased. Other industrial plants in the Borough engaged in processing similar to defendant are, however, permitted to discharge their industrial waste into the system and are charged the standard rate. Welch was charged a sewer rental based on its total water purchases, which amount it refused to pay. When the municipality attempted to foreclose a lien for unpaid rentals, Welch challenged the charges as unreasonably disproportionate to the service rendered. The Borough contended that defendant should pay a sewer rental based on 20 percent of the total amount of water consumed, regardless of the use of the sewer system.

The Supreme Court of Pennsylvania, ruling

against the Borough, stated that in the construction, operation, and maintenance of a sewer system, a municipality engages in a proprietary function and is entitled to receive payment for the service rendered. The charge that is made for sewer service, however, must be based upon actual use, and must be reasonably proportional to the service rendered and not in excess of it. The court noted that the practical problem of determining the amount of use of the system by particular users has usually been resolved by relating the sewer charge to the amount of water provided to the property, which is apt to be roughly proportional to what flows out as sewage.

The court commented that if the Borough's contention were upheld—that the sewer rental charge is not related to sewer use—the charge would be in the nature of a tax rather than for service rendered, and it pointed out that sewer rentals were not taxes. The Borough's method of computing the sewage charge based upon total water consumption regardless of sewer use was held to result in an arbitrary, improper, inequitable, and unlawful charge, as was demonstrated by the fact that, while it refuses to accept industrial waste from Welch, it accepts the industrial waste of other industries, doing the same type of processing as Welch, at the standard rate. The court affirmed a lower court order fixing the charge on the basis of the amount of water which was reasonably found to have been discharged into the sewer system (5 percent of the intake).—SIDNEY EDELMAN, *assistant chief, Public Health Division, Office of General Counsel, Department of Health, Education, and Welfare.*